

ity of our lay fellow citizens will be glad to avail themselves of services which can be best given by members of a well-trained and efficient and well-organized medical profession.

REPORTS FOR LIFE INSURANCE COMPANIES

That the House of Delegates of the American Medical Association adopted the following resolution on May 17, 1927, indicates rather strongly a reaction against a common abuse:

"Whereas, There is a growing tendency on the part of some insurance and indemnity companies, as well as industrial concerns, to impose on physicians by requesting or expecting that more or less complete physical examinations, including written reports of same, or that a written expert medical opinion concerning patients shall be made for nominal fees or perhaps no fees at all, and that there is increasing tendency on the part of such organizations or concerns to shift responsibility by making erroneous claims that the services are in the interest of the patient or client from whom the physician cannot justly claim compensation; therefore be it

"Resolved, That it is the sense of the American Medical Association as represented by this House, that the members of the American Medical Association are under no moral or legal obligations to furnish professional services or expert professional opinion concerning any patient, or reports concerning professional services rendered any patient, to insurance or indemnity companies, to industrial concerns or their agents, or for the benefit of any third party, unless paid the customary fees charged by the medical men of that community for similar services rendered to private patients."

Few physicians have escaped receiving a courteous note from some life insurance company to the effect that "in the month of such a year you treated John Doe. Will you send us a report of your findings and treatment?" The question of responsibility to patient and of inviolability of confidence in these cases is often a nice one. Is the physician's report for his patient's interest or the insurance company's? The question whether this clinical work of searching back records and filling out a questionnaire should be a gratuitous service or not has evidently received frequent consideration by members of the Association, and has been explicitly answered in the adoption of the above resolution.

MEDICAL TESTIMONY IN CRIMINAL CASES

Factors in the Making of Reputations.—Whatever, in the eyes of the laity, affects the reputation of the regular medical profession should be of interest to those who believe in organized medicine. For we organize, to maintain as fully as possible, the highest standards of medical practice and conduct. If we would attain to our fullest

efficiency with our fellow citizens, it is not only important that our general practice and conduct should measure up to proper standards, but that we should avoid unimportant issues and dilemmas, in which our participation is apt to be misjudged and bring reproach upon us, either as individuals or as a profession.

Or, to put it otherwise, if we are wise we will avoid those things in which so distorted a presentation of our professional participation may be made as to create in the minds of thousands of lay fellow citizens a distrust of our scientific knowledge or of our honesty of motives.

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A Recent Medico-Legal Case.—These and associated thoughts must have come to many of us, when in a recent homicide case in one of the courts of Los Angeles a battle of medical experts was placed upon the stage.

There is no desire here to go into the merits of that or any other of the recent cases that have had somewhat similar stage settings. Nor is there any wish to deny to any member of the profession his right to fight valiantly for scientific truth, as he sees it. It is justifiable to hold, however, that those members who engage in these medico-legal battles in criminal and similar cases should be very certain as to the whys and wherefores that make them parties to these controversial court scenes. For the lurid portrayal of their viewpoints in the daily newspapers is oftentimes anything but edifying, and certainly far removed from that atmosphere of decent respect, in which all physicians who believe in the ethical practice of the healing art desire the public to hold concerning the medical profession and its members.

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Where Rests the Blame for Newspaper Notoriety in Medico-Legal Cases?—It is quite true that the newspapers are largely to blame for much of this unfortunate state of affairs. When a human life is at stake before the courts it is quite as much in order for a physician to give just and honest battle in defense of that human life as it is for the same or a colleague physician to strive to save the life of a patient in private or hospital practice. Nevertheless, as individuals of mature years, we should hesitate and give careful thought before we consent to acquiesce in the requests of legal defenders or prosecutors, who seek medical opinion that largely or entirely will be in favor of their respective positions, or who will so word their questions as to give false impressions to court or jury.

It must be remembered that one thousand members of the profession, day in and day out, year after year, can give most conscientious and efficient and at times most altruistic service to indigent lay fellows, and receive for services so ren-

dered practically no words of praise or laudatory comment in the lay press.

But one to a half-dozen members of the profession, who, aided and abetted by attorneys, permit themselves to become parties to one of these court controversies, such as a spectacular murder case, will receive in a few days, not lines or inches, but whole columns of publicity. The accentuation of widely conflicting medical opinion, according as the presumable expert is on the side of the defense or prosecution, does not make for kindly opinion of our profession by lay citizens. If this lack of respect largely vented itself on the medical participants in these spectacles, it would not be so bad, and we may add, that in itself soon would bring to a stop much of such expert medico-legal controversies. Unfortunately, however, the loss of respect by the laity is vented upon the profession as a profession; and in the eyes of many laymen the opinion takes root that so-called regular and ethical practitioners have after all not so wide a breach between themselves and the cultist practitioners whom they decry because of low standards of professional outlook.

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How Can the Unfortunate Phases of Medico-Legal Controversies Be Minimized?—It is granted that the whole subject is a big and broad one, and that many vital and important elements enter therein.

We have no easy solution to offer for the difficulties that are encountered in this form of legal procedure. We medical men are far distant from our lawmakers and from those who devise our political and civil codes; and in one sense, because of our lack of broad knowledge of these matters, we are quite content that our legal brethren should bear the major responsibility for the laws that are placed in our statute books.

In matters of so-called expert medical testimony we are, however, as a medical profession, very much interested. We regret that in our American courts our legal brethren should have permitted a system to have grown up, as regards expert testimony, that is so far removed from the English system. In the English system, from a panel of carefully selected medical men, the court seeks knowledge as to facts and expert opinions, and in that country medical men are not lured at so many hundred dollars per day, to give expression to partisan viewpoints in favor of the side supplying the retaining fee.

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The California Legislature Convenes in January Next.—In the last California legislature there were many amendments to the criminal and other codes. At the session of the legislature, which will convene in January next, these and related matters will continue to receive special attention.

Would it not be a very proper thing for component county medical societies whose members are interested in these matters to appoint committees to confer with committees from their local bar associations, in the hope of bringing about

some improvements in the present deplorable methods? Working through the local and state medical and bar associations it should be possible to bring about a betterment in these medico-legal and expert medical testimony procedures that would be of real benefit, not only to the medical and legal professions, but to the public at large.

Specialism Running Wild—An Attendant for Each and Every Nerve.—An apt valuation seldom dies. "Truth crushed to earth will rise again," so does the epitomization of an unchanging condition endure, provided in the first place "Father was right."

A correspondent has asked that the journal shall reprint from *Judge* magazine this clipping that appeared later in the *Journal of the Medical Society of New Jersey*. The article is a modern tribute to the skill of court jesters of yesteryear. "If the shoe fits, let the profession put it on."

Headed "Specialists, Specialists, but Not a Doctor in Sight," the article, signed by Don Herold, reads in part:

"Who remembers when we used to call a doctor in case of sickness? Nowadays we have to be mighty delicate about that. We might get an inch over the boundary line, and call a doctor for the wrong organ. Lots of people just die now rather than decide which specialist to summon.

"In the big cities at any rate there is nobody to come and see us when we are 'just sick.' We have to know exactly where we are sick and what ails us.

"Half the time we are sick in between organs, so there is nobody in town to cover the situation. The only thing to do is to wait until the disease shifts to some part of our anatomy covered by a specialist of whom we happen to know.

"What is needed is a medical brokerage service. When theaters became so numerous in New York, for example, that it was impossible to run around to all of them to decide what show to see, ticket agencies naturally sprung up where you could stand in front of a counter and get a seat for any show in town. We need McBrides and Tysons for the medical profession. We need medical brokers who will send us where we belong.

"Once there used to be a few accepted kinds of specialists—ear, nose and throat men, for instance. Why, gosh, a man who covers the ear, nose and throat today is almost a general practitioner. There are now twenty-seven kinds of nose doctors alone. A man can now devote his whole life to the outside of the inside ear.

"Back in Bloomfield the same doctor used to bring us and bury us. Here in New York the obstetrician gives us a slap and a promise and turns us over to the pediatrician. There is a new doctor down the line every fifteen or twenty minutes from the cradle to the grave. People are not only chopped up into sections geographically but chronologically.

"A liver man will not even listen to young lungs. A heart man does not care how you are—all he knows about is hearts. And practically none of the new-fashioned doctors care how you feel.

"Let us pray that this intense specialization does not spread to other fields. It may be well and good to peddle a stomachache all over Manhattan before finding a buyer, but may we be spared from dragging a motor car all over the city to find 'the right man.'

"Oh, no, we don't touch that. You will have to take your car to a rear axle specialist. We concentrate on those teeny-weeny little wires in your spark plugs. And for that hoarseness in your klaxon you should see Croupem, the horn man."—*Illinois M. J.*

Hints on Beriberi Prevention.—Beriberi develops if other vitamin-containing food is not eaten with machine-polished rice.

Beriberi is prevented if those who eat machine-polished rice also eat maize, chicharo, habichuelas, sitao, patani, batao, payap, balatong, peanuts, etc.—*Philippine Health Service.*